

#71 Ref for Refund
07-19-04

PATENT

SEP 23 PM 3:54

Attorney Docket No. YOR920010363US1 (8728-519)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Yu et al.

Serial No: 09/918,952

Filed: July 31, 2001

For: **METHOD FOR BUILDING SPACE-SPLITTING
DECISION TREE**

Mail Stop 16
Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

REQUEST FOR REFUND
(Improper Charge of Deposit Account)

I. REFUND REQUEST

This is a request for a refund with respect to the charge to Deposit Account No. 50-0510/IBM (Yorktown Heights) for the above-identified application.

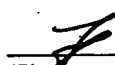
CERTIFICATION UNDER 37 C.F.R. §1.8(a)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop 16, Commissioner of Patents, PO Box 1450, Alexandria VA 22313-1450 on May 26, 2004.

Dated: May 26, 2004

Frank Chau

(Type or print name of person mailing paper)


(Signature of person mailing paper)

II. FEES CHARGED FOR WHICH REFUND REQUESTED

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AMOUNT OF REFUND
REQUESTED

<input type="checkbox"/> filing fee	\$ _____
<input type="checkbox"/> surcharge for filing the basic filing fee on a date later than the filing date of the application (37 C.F.R. §1.16(e))	_____
and/or	
<input type="checkbox"/> surcharge for filing the oath or declaration on a date later than the filing date of the application (37 C.F.R. §1.16(e))	_____
<input type="checkbox"/> extension of term	_____
<input type="checkbox"/> first month	_____
<input type="checkbox"/> second month	_____
<input type="checkbox"/> third month	_____
<input type="checkbox"/> fourth month	_____
<input type="checkbox"/> excess claims	\$ _____
<input type="checkbox"/> issue fee	_____
<input type="checkbox"/> petition fee	_____
<input type="checkbox"/> patent maintenance fee	_____
<input type="checkbox"/> first maintenance fee	_____
<input type="checkbox"/> second maintenance fee	_____
<input type="checkbox"/> third maintenance fee	_____

<input type="checkbox"/> patent maintenance fee surcharge	_____
<input checked="" type="checkbox"/> other: <u>Nine (9) Extra dependent claims fee</u>	\$ <u>612.00</u>

TOTAL REFUND REQUESTED	\$ <u>450.00</u>

III. EXPLANATION OF WHY CONTESTED CHARGE IS IN ERROR

The above charges were charged to deposit account no. 50-0510/IBM (Yorktown Heights). On January 26, 2004, applicant filed an Amendment in response to the Office Action mailed September 25, 2003 with the U.S. Patent and Trademark Office. The Amendment Transmittal (a copy of which is attached) indicated that the claims remaining after amendment was 34 (total) and 8 (independent). The highest claims previously paid for was 25 (total) and 3 (independent). As such, fees for additional claims were paid via Deposit Account No.: 50/0150/IBM (Yorktown Heights) for 9 extra dependent claims in the sum of \$612.00 and the sum of \$430.00 for 5 extra independent claims. Upon filing the Amendment, the applicant made the discovery that the total amount paid for the 9 extra dependent claims was incorrect. The total amount paid for 9 (dependent) claims was \$612.00. The correct amount that should have been charged was \$162.00. The dollar amount was inadvertently misconstrued. Therefore, Applicant believes that the charge of \$612.00 was mistakenly charged. Applicant respectfully request that a refund amount for \$450.00 be granted.

IV. MANNER OF REFUND

Please make refund by

- ☒ crediting Deposit Account No. 50/0518/IBM (Yorktown Heights)
☐ refunding payment.

Respectfully requested,

F. CHAU & ASSOCIATES, LLC

By:


Frank Chau

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